Your Dental Benefits

Basic Plan

AMERITAS DENTAL PLAN BENEFITS				
Plan Feature	PPO In-Network Dentist	Non-PPO Out-of-Network Dentist		
Deductible for both Basic and Major Procedures (waived for preventive care, orthodontia and TMJ)	\$50 per individual \$150 per family	\$50 per individual \$150 per family		
Maximum Benefit	\$1,000	\$1,000		
Orthodontia & TMJ lifetime maximum (per person)	\$2,000	\$2,000		
Preventive Procedures (exams, cleanings – 2 per year, x-rays, sealants)	Plan covers 100%	Plan covers 50%		
Basic Procedures (fillings, root canals, gum disease treatment, extractions)	Plan covers 80%	Plan covers 50%		
Major Procedures (initial and replacement crowns, dentures, bridges)	Plan covers 50%	Plan covers 25%		
Orthodontia (to age 19) & TMJ Procedures	Plan covers 50%	Plan covers 25%		

	Employee Only (Single Coverage)	Employee + Spouse (Two Party Coverage)	Employee + Depen- dent Children (Four Party Coverage)	Employee + Spouse + Dependent Children (Family Coverage)
Ameritas Dental	\$21.16	\$42.36	\$61.04	\$66.32

Premium Plan

Plan Feature	PPO In-Network Dentist	Non-PPO Out-of-Network Dentist
Deductible for both Basic and Major Procedures (waived for preventive care, orthodontia and TMJ)	\$50 per individual \$150 per family	\$50 per individual \$150 per family
Maximum Benefit	\$1,500	\$1,500
Orthodontia & TMJ lifetime maximum (per person)	\$2,000	\$2,000
Preventive Procedures (exams, cleanings – 2 per year, x-rays, sealants)	Plan covers 100%	Plan covers 80%
Basic Procedures (fillings, root canals, gum disease treatment, extractions)	Plan covers 80%	Plan covers 80%
Major Procedures (initial and replacement crowns, dentures, bridges)	Plan covers 50%	Plan covers 50%
Orthodontia (FOR ADULTS AND CHILDREN) & TMJ Procedures	Plan covers 50%	Plan covers 50%

	Employee Only (Single Coverage)	Employee + Spouse (Two Party Coverage)	Employee + Depen- dent Children (Four Party Coverage)	Employee + Spouse + Dependent Children (Family Coverage)
Ameritas Dental	\$23.68	\$47.40	\$68.32	\$74.24